



PTO/SB/01 (12-97)

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted Initial <input checked="" type="checkbox"/> Declaration Submitted after Filing (surcharge (37 CFR 1.16(e) required))	Attorney Docket Number	ASTRX-0108
	First Named Inventor	James Castillo
	COMPLETE IF KNOWN	
	Application Number	10 /067,498
	Filing Date	02/04/2002
	Group Art Unit	3764
	Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

JOINT BRACE WITH MULTI-PLANAR PIVOTING ASSEMBLY AND INFINITELY ADJUSTABLE LIMB EXTENSION REGULATOR

(Title of Invention)

the specification of which

☐ is attached hereto
OR☒ was filed on (MM/DD/YYYY) 02/04/2002 as United States Application Number or PCT International Application Number and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached	
				YES	NO
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

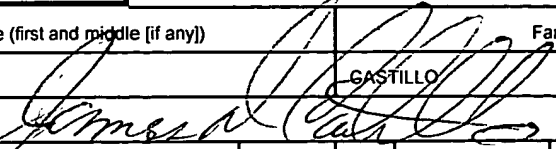
☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

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DECLARATION — Utility or Design Patent Application							
<p>I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.</p>							
U.S. Parent Application or PCT Parent Number				Patent Filing Date (MM/DD/YYYY)		Parent Patent Number (if applicable)	
United States Patent Application Serial No. 09/776,523				02/02/2001			
<input type="checkbox"/> Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02 attached hereto.							
<p>As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:</p> <div style="display: flex; justify-content: space-between; align-items: flex-start;"> <div style="width: 40%;"> <input type="checkbox"/> Customer Number _____ OR <input type="checkbox"/> Registered practitioner(s) name/registration number listed below </div> <div style="width: 50%; text-align: right;"> → Place Customer No. Bar Code Label Here </div> </div>							
Name		Registration Number		Name		Registration Number	
<input type="checkbox"/> Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB02C attached hereto.							
<p>Direct all correspondence to: <input checked="" type="checkbox"/> Customer Number _____ OR <input type="checkbox"/> Correspondence Address Below or Bar Code Label <u>007663</u></p>							
Name		Stetina Brunda Garred & Brucker					
Address		75 Enterprise, Suite 250					
Address							
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				ZIP		92656	
Country		United States		Telephone		(949)855-1246	
				Fax		(949)855-6371	
<p>I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.</p>							
Name of Sole or First Inventor:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
JAMES				GASTILLO			
Inventor's Signature						Date	
						3-19-02	
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				ZIP		93440	
				Country		United States	
<input type="checkbox"/> Additional inventors are being named on the ____ supplemental Additional Inventor(s) sheet(s) PTO/SB02A attached hereto.							